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TO: Examiner Michael J. Araj, Group Art Unit 3733
 COMPANY: U.S. Patent and Trademark Office

FAX NUMBER: 571-273-8300
 PHONE NUMBER:

FROM: Douglas A. Collier

DIRECT DIAL: (317) 238-6333
 FAX NUMBER: (317) 636-1507

RE: Response to Office Action for U.S. Patent Application No. 10/825,962 to Aaron D. Markworth

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Client Matter No.: 333 MSDI-951

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PTO/SB/21 (09-04)

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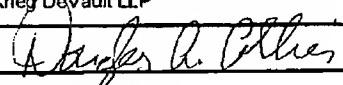
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Total Number of Pages in This Submission

| | |
|------------------------|--------------------|
| Application Number | 10/826,662 |
| Filing Date | April 16, 2004 |
| First Named Inventor | Aaron D. Markworth |
| Art Unit | 3733 |
| Examiner Name | Michael J. Araj |
| Attorney Docket Number | MSDI-951/P32399.00 |

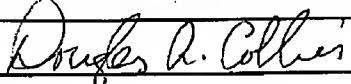
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| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|-------------------------------------------------------------------------------------|----------|--------|
| Firm Name | Krieg DeVault LLP | | |
| Signature |  | | |
| Printed name | Douglas A. Collier | | |
| Date | December 30, 2008 | Reg. No. | 43,556 |

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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| Signature |  | | |
| Typed or printed name | Douglas A. Collier | Date | December 30, 2008 |

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2009

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
180.00**Complete If Known**

| | |
|----------------------|--------------------|
| Application Number | 10/825,962 |
| Filing Date | April 16, 2004 |
| First Named Inventor | Aaron D. Markworth |
| Examiner Name | Michael J. Araj |
| Art Unit | 3733 |
| Attorney Docket No. | MSDI-951/P32399.00 |

METHOD OF PAYMENT (check all that apply)
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| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> | | <u>SEARCH FEES</u> | | <u>EXAMINATION FEES</u> | | <u>Fees Paid (\$)</u> |
|-------------------------|--------------------|---------------------|--------------------|---------------------|-------------------------|---------------------|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | 0.00 |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | | |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|----|
| | - 20 or HP = | x | = | <u>Fee (\$)</u> | <u>Fee (\$)</u> | |
| | | | = 0.00 | | 52 | 26 |

HP = highest number of total claims paid for, if greater than 20.

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|----------------------|-----------------|----------------------|
| | - 3 or HP = | x | = | | |
| | | | = 0.00 | | |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---------------------------------------------------------|-----------------|----------------------|
| - 100 = | / 50 = | (round up to a whole number) x | = | 0.00 |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental Information Disclosure Statement

Fees Paid (\$)180.00

| | |
|---------------------|-------------------------------------------------------------------------------------|
| SUBMITTED BY | |
| Signature |  |
| Name (Print/Type) | Douglas A. Collier |

Registration No.
(Attorney/Agent) 43,556

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Date December 30, 2008

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